



SERIAL/PATENT NO. \_\_\_\_\_ FILED/ISSUED \_\_\_\_\_  
APPLICANT Morin et al.

KINDLY ACKNOWLEDGE RECEIPT OF ACCOMPANYING PAPERS WITH YOUR MAIL ROOM STAMP.

SERIAL/PATENT NO. \_\_\_\_\_ FILED/ISSUED \_\_\_\_\_

APPLICANT Morin et al.

KINDLY ACKNOWLEDGE RECEIPT OF ACCOMPANYING PAPERS WITH YOUR MAIL ROOM STAMP.

☐ \$ \_\_\_\_\_ check  
☐ Authorization - Deposit Account No. \_\_\_\_\_  
☒ Utility application ☐ Provisional application  
☒ 14 pages, 11 claims, 3 drawing sheets  
☐ CFA transmittal ☐ Continuation transmittal  
☐ RCE transmittal ☐ Divisional transmittal  
☒ Certificate of Express Mail Label No.: 22154 U.S. PTO  
EV30151618US 10/701165  
☐ Declaration and Power of Attorney  
☐ Assignment w/Cover Sheet  
☐ Change of Correspondence Address  
☐ Response to Notice to File Missing Parts + copy  
☒ Citation Under 37 CFR §.1.97 (IDS)  
☒ Form PTO-1449 + copies of cited references  
☐ Response to Restriction Requirement  
☐ Response to Election Requirement  
☐ Amendment Transmittal Form  
☐ Amendment (Official Action of \_\_\_\_\_)  
☐ Request for Extension of Time (\_\_\_\_\_ mos.)  
☐ Notice of Appeal  
11/4/03 54488  
ATE FILE NO. ATTORNEY

☐ Appellant's Appeal Brief (x3) - \$320 large entity  
☐ Status Request  
☐ Transmittal of Formal Drawings (\_\_\_\_\_ sheets)  
☐ Letter to Official Draftsman  
☐ Part B--Issue Fee Transmittal  
☐ Publication Fee Transmittal  
☐ PCT Request (\_\_\_\_\_ pp.) + Application (\_\_\_\_\_ pp.)  
☐ National Phase Transmittal Letter  
☐ Response to PCT Invitation to Correct Defects  
☐ Ch. II Demand ☐ Power of Attorney  
☐ Revocation of Prior Powers of Attorney and POA  
☐ Petition for \_\_\_\_\_ + \$130 Fee  
☐ Terminal Disclaimer  
☐ Request for Correction to Filing Receipt  
☐ Request for Correction to Assignment and/or cover  
☐ Transmittal of Certified Copy of Priority Document  
☒ Preliminary Amendment  
☐ Submission of Proposed Drawing Modification  
☐ Request Certificate of Correction + PTO 1050  
☐ Substitute specification (w/modified up version)  
☒ Other (replacement drawing sheet)

f (x3) - \$320 large entity

Drawings (\_\_\_\_\_ sheets)  
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Application (\_\_\_\_\_ pp.)  
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Power of Attorney  
vers of Attorney and POA  
+ \$130 Fee

to Filing Receipt  
to Assignment and/or cover  
Copy of Priority Document  
it  
d Drawing Modification  
Correction + PTO 1050  
(w/modified up version)  
11/4/03



EV 301516187 US



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PO ZIP Code <u>32801</u>	Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> Second	Flat Rate Envelope <input type="checkbox"/>	
Date In <u>11/4/03</u>	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Postage <u>\$ 136</u>	
Time In <u>4:44</u>	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee	
Weight <u>14.3</u> lbs.	Int'l Alpha Country Code	COD Fee	Insurance Fee
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials <u>B</u>	Total Postage & Fees <u>\$ 136</u>	

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Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent. (If delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.		
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Customer Signature		

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